



APPLICATION FOR EMPLOYMENT FOR THE TOWN OF WOODSTOCK

Town of Woodstock
135 North Main Street
Woodstock, Virginia 22664
Phone: 540.459.3621
Fax: 540.459.3085
www.townofwoodstockva.gov

**AN EQUAL OPPORTUNITY EMPLOYER
ADA REASONABLE ACCOMMODATIONS UPON REQUEST**

Instructions: Please complete the entire application. Incomplete applications WILL NOT be considered. Mail or bring your completed application to the Town of Woodstock Municipal Office at 135 North Main Street, Woodstock, Virginia 22664.

POSITION APPLYING FOR _____ DATE OF APPLICATION _____

PRINT NAME _____
(LAST) (FIRST) (MIDDLE)

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE Home (____) _____ Work (____) _____

EMAIL _____ Best Time to Contact You? __:___AM/PM

Are you legally eligible to work in the U.S.? ☐ Yes ☐ No Are you a veteran? ☐ Yes ☐ No
(Proof of citizenship or immigration status will be required upon employment)

Do you have a valid driver's license? ☐ Yes ☐ No Commercial Drivers License? ☐ Yes ☐ No

Expiration date: _____ Driver's License Number: _____

Have you previously filed an application with the Town of Woodstock? ☐ Yes ☐ No

If "YES" give position applied for and date _____

Are you currently employed? ☐ Yes ☐ No May we contact your present employer? ☐ Yes ☐ No

Date available for work ____/____/____ What is your desired salary range? _____

EDUCATION: Name and location of high school attended: _____

Did you graduate? ☐ Yes ☐ No If not, have you passed a G.E.D. test? ☐ Yes ☐ No

	School & Location	From	To	Date Graduated	Degree	Major Area of Study
College Or University						
Other Education						

SPECIAL QUALIFICATIONS AND SKILLS (please describe any specialized training and skills, professional licenses and certificates, publications, scholastic honors, foreign languages, etc.):

PROFESSIONAL, TRADE, BUSINESS, OR CIVIC ACTIVITIES AND OFFICES HELD (you may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status):

EMPLOYMENT EXPERIENCE: Start with your present job and work back, include military and volunteer experience. Additional experience should be listed by attaching separate sheets of paper or a personal resume. Be sure to include all requested information.

Present Employer _____

Address _____

Phone Number (____) _____ Fax (____) _____

Job Title _____ Starting Salary _____ Present/Ending Salary _____

Dates of Employment: From _____ to _____ Hours per week _____

Supervisor's Name _____

Reason for Leaving _____

Work Description _____

Employer _____

Address _____

Phone Number (____) _____ Fax (____) _____

Job Title _____ Starting Salary _____ Present/Ending Salary _____

Dates of Employment: From _____ to _____ Hours per week _____

Supervisor's Name _____

Reason for Leaving _____

Work Description _____

Employer _____

Address _____

Phone Number (____) _____ Fax (____) _____

Job Title _____ Starting Salary _____ Present/Ending Salary _____

Dates of Employment: From _____ to _____ Hours per week _____

Supervisor's Name _____

Reason for Leaving _____

Work Description _____

Have you ever been dismissed or forced to resign a position? ☐ Yes ☐ No

Have you ever been convicted of any offense against the law? Please omit juvenile offenses and minor traffic violations. Include convictions by general court martial while in the military service. ☐ Yes ☐ No

If "YES", give date, place, charge, court, and fine or sentence. _____

(A conviction does not automatically mean that you cannot be employed. What you were convicted of and how long ago are important. Give all the facts so that a decision can be made.)

How did you learn about the position for which you are applying? _____

ADDITIONAL INFORMATION: State any additional information that you feel may be helpful to us in considering your application. Please also feel free to include your personal resume with this application.

REFERENCES:

1. Name _____

Address _____

Phone Number (____) _____

2. Name _____

Address _____

Phone Number (____) _____

3. Name _____

Address _____

Phone Number (____) _____

Note to Applicants: Please do not answer this question unless you have been informed about the requirements of the job for which you are applying:

Can you perform the essential functions of the job for which you are applying, either with or without a reasonable accommodation? ☐ Yes ☐ No

ATTENTION: THIS STATEMENT MUST BE SIGNED.

I certify that the statements made by me in this application are true, complete, and correct to the best of my knowledge, and that misrepresentation or omissions may result in the rejection of my application, permanent ineligibility for appointments, or dismissal.

Signature of Applicant

Date

Thank you for your interest in the Town of Woodstock!